

# Arthritis



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## Controlling Arthritis in a Rural Community Through the Arthritis Self-Help Course

### Public Health Problem

Arthritis or chronic joint symptoms affect almost 70 million Americans—nearly one of every three adults, making it among the most common health problems in the United States. Arthritis is the most frequent cause of disability in America; more than 7 million citizens are limited in some way because of arthritis. In Alabama 36%, or 1.1 million people, have arthritis. Of this number, approximately 46% have household incomes of less than \$20,000, and 50% have less than a high school education. In addition, access to health care continues to be a problem outside of the major metropolitan area of Birmingham.

### Evidence That Prevention Works

Research has shown that the pain and disability associated with arthritis can be minimized through the use of appropriate self-management behaviors and early diagnosis and treatment. The Arthritis Self-Help Course, developed at Stanford University, teaches people how to manage their arthritis and minimize its effects. This course, taught in a group setting, has been shown to reduce arthritis pain by 20% and physician visits by 40%.

### Program Example

With CDC support, Alabama is developing and evaluating a community project in Pineapple, an underserved, rural, African American community in Wilcox County, which has some of the state's poorest health indicators. This project, building on an existing community health advisory model, delivers the Arthritis Self-Help Course. By encouraging people to participate in this course, public health advisors are improving the quality of life for people with arthritis in this rural setting. As a result of partnerships developed in conjunction with the Alabama Arthritis Coalition, this project has encouraged a rheumatologist to travel 2 hours from Tuscaloosa to the community of Pineapple to hold a clinic one day each month to give this underserved group access to specialized care and treatment.

### Implications

The Arthritis Self-Help Course has reached less than 1% of the population nationwide; more widespread use of this course would save money and reduce the burden of arthritis. This project demonstrates the importance of identifying and implementing strategies to increase the use of this course in rural, underserved communities. Community-based projects like the one in Alabama are more likely than traditional ones to be responsive to the needs and culture of the community and can serve as a model for reaching underserved populations in other states as well.

### Contact Information



## Introducing a Spanish Version of the Arthritis Self-Help Course

### Public Health Problem

Arthritis or chronic joint symptoms affect almost 70 million Americans—nearly one of every three adults, making it among the most common health problems in the United States. Arthritis is the most frequent cause of disability in America; more than 7 million citizens are limited in some way because of arthritis. In California, which has the largest Hispanic population in the United States, approximately 4 million adults have self-reported arthritis.

### Evidence That Prevention Works

The Arthritis Self-Help Course, developed at Stanford University, teaches people how to manage their arthritis and minimize its effects. This course, taught in a group setting, has been shown to reduce arthritis pain by 20% and physician visits by 40%; however, the Arthritis Self-Help Course has reached less than 1% of people with arthritis throughout the United States.

### Program Example

With CDC support, California is increasing its efforts to reduce the burden of arthritis among diverse populations, including its Hispanic population. The California State Health Department is working with the Arthritis Foundation, Southern California Chapter, to provide a Spanish-language version of the Arthritis Self-Help Course (SASHC) for farm and transient workers. The SASHC, also developed at Stanford, was designed specifically to meet the needs of Spanish-speaking people, and California is conducting the program in communities with the highest proportions of people who only speak Spanish. Approximately 141 participants enrolled in the course between October 1999 and May 2001. Participants reported significant improvement in their ratings of general health, sleep, depression levels, and ability to cope with activities of daily living. At follow-up, participants continued to show improved long-term outcomes. Participants' comments indicate their high satisfaction with the program and improved communication with others regarding arthritis.

### Implications

Identifying and implementing strategies to increase the use of this course in Hispanic communities will expand the reach of this program to diverse populations. It also can serve as a model for reaching underserved populations in other states. More widespread use of this course nationwide would save money and reduce the burden of arthritis. This program demonstrates the importance of creating campaigns and materials in multiple languages to reach special populations with prevention messages.



## Promoting Physical Activity for People With Arthritis

### Public Health Problem

Arthritis or chronic joint symptoms affect almost 70 million Americans—nearly one of every three adults, making it among the most common health problems in the United States. Arthritis is the most frequent cause of disability in America; more than 7 million citizens are limited in some way because of arthritis. Arthritis affects one of every three adults in Georgia, or approximately 1.8 million people; of these 1.8 million people with arthritis, 34% report that they engage in less physical activity than the general population.

### Evidence That Prevention Works

A growing number of reports suggest that exercise has positive health benefits for people with arthritis. CDC's Arthritis Program is supporting research to examine the role of physical activity in lessening the effects of arthritis. The Surgeon General's report on physical activity and health brings together state-of-the-art research on the benefits of physical activity. According to the report, "Physical activity is essential for maintaining the health of joints and appears to be beneficial for controlling symptoms of osteoarthritis and rheumatoid arthritis."

### Program Example

The Georgia Division of Public Health piloted a physical activity program for people with arthritis in Georgia's West Central Health District. Three counties, representing urban, small-town, and rural populations, participated. Program leaders include representatives of the Georgia Division of Public Health, the Arthritis Foundation, and the Area Agency on Aging. Teams of 8 to 10 people with arthritis participated in 20 weeks of physical activity such as walking, gardening, swimming, and ballroom dancing. Team captains held group activities for their teams and provided educational materials and encouragement via telephone calls. Participants kept logs of their physical activity each week. This project has served as a catalyst for social change in the area. Local residents who recognized the need for a safe place to engage in physical activity have formed a coalition to advocate for such a place from the Webster County Board of Commissioners.

### Implications

This program will provide information on how to implement community-based physical activity programs in urban, small-town, and rural settings. This information will help Georgia expand its program and will help other states increase physical activity levels among their residents. Using preliminary evaluation data, the Georgia Division of Public Health has identified gaps in the program. The revised program, to be conducted in 2003, will include an educational component, the Arthritis Self-Help Course, and will rely on partners to sponsor classes, recruit participants, and provide staff to serve as program coordinators and team captains. The second pilot will be conducted in metropolitan Atlanta and southwest Georgia.

### Contact Information

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## Improving Arthritis-Related Quality of Life Among Farmers

### Public Health Problem

Arthritis or chronic joint symptoms affect almost 70 million Americans—nearly one of every three adults, making it among the most common health problems in the United States. Arthritis is the most frequent cause of disability in America; more than 7 million citizens are limited in some way because of arthritis. There is substantial evidence that farmers and those involved in farm-related activities are at increased risk for hip and knee osteoarthritis. Approximately 1.5 million people in Missouri have arthritis, which represents 37% of the adult population in the state.

### Evidence That Prevention Works

Research has shown that the pain and disability associated with arthritis can be minimized through the use of appropriate self-management behaviors and techniques. Particular modifiable behaviors include activities that require kneeling, squatting, and lifting heavy objects.

### Program Example

The Missouri Arthritis & Osteoporosis Program (MAOP) partnered with the Missouri Arthritis Rehabilitation Research and Training Center to promote and support efforts of the University of Missouri Agricultural Engineering Extension Project that targets farmers in their state. The AgrAbility Project engages extension specialists, disability experts, rural professionals, and volunteers, including MAOP staff. This partnership organizes and assists farmers in remaining active despite disabilities related to their arthritis. This assistance includes giving instruction in the appropriate way to enter and exit a tractor in order to minimize pain, distributing arthritis-related information, providing adaptive devices and technology, and demonstrating techniques to help improve the farmers' quality of life. The project is designed to help an estimated 30,000 of Missouri's 136,000 farmers, ranchers, and agricultural workers who have a disease, disorder, or disability that limits their ability to perform some work-related or daily-living tasks.

### Implications

Agriculture is one of Missouri's largest and most diverse sources of revenue. Developing programs that will improve the work-related quality of life for this segment of the population will reduce the number of people who experience limitations because of arthritis. In addition, these programs could serve as a model for other states with large agricultural populations.





## Increasing Physician Referrals to the Arthritis Self-Help Course

### Public Health Problem

The Utah Arthritis Program conducted social marketing research to develop effective messages and practical ways to reach women with arthritis and encourage them to participate in the Arthritis Self-Help Course. Utah found that none of the women with arthritis who participated in the research had been referred to self-help courses by their medical providers, even though self-help courses can reduce arthritis pain significantly. The lack of referrals appears to be widespread: in 1997, the Arthritis Self-Help Course reached less than 1% of people with arthritis nationwide.

### Evidence That Prevention Works

Developed at Stanford University, the Arthritis Self-Help Course teaches people how to better manage their arthritis and minimize its effects. This course, taught in a group setting, has been shown to reduce arthritis pain by 20% and physician visits by 40%.

### Program Example

With CDC support, the Utah Department of Health implemented a program to identify factors that influence physicians' referrals to arthritis self-help programs. Physicians' knowledge, attitudes, beliefs, and practices related to referring patients to arthritis self-help programs and other educational resources for arthritis were assessed. This research included five 2-hour focus groups comprising Utah primary care providers including nurse practitioners, physician assistants, and physicians. Additionally, all primary care providers in Utah (600 total) were mailed a survey, and 22% of these were returned. The findings of the survey support the findings of the focus groups. The primary findings were that the participants had a very low "top of mind" awareness of arthritis resources, felt "hopeless" about treating those with arthritis, had a desire for additional information about resources that could assist their patients, and would be more likely to recommend the Arthritis Self-Help Course if they received positive feedback from patients who had taken the course.

### Implications

The Arthritis Self-Help Course is a cost-saving intervention that reduces arthritis pain and physician visits. Using data from this research program, the Utah Department of Health has designed and implemented a provider-based quality improvement project focused on increasing participation in self-management programs such as the Arthritis Self-Help Course. More widespread use of the Arthritis Self-Help Course nationwide would save money and reduce the burden of arthritis. This program demonstrates the importance of research and understanding reasons physicians do not refer patients to this course, which allows various groups to develop interventions to increase physician referrals.

### Contact Information

